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<b>NOTICE OF APPEAL FROM THE EXAMINER TO THE BOARD OF PATENT APPEALS AND INTERFERENCES</b>		Docket Number (Optional) 58600-8229.US00										
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 15%;"></td> <td style="width: 85%;">In re Application of : Ishii <i>et al.</i></td> </tr> <tr> <td></td> <td>Application Number: 10/680,356</td> </tr> <tr> <td></td> <td>Filed: 10/06/2003</td> </tr> <tr> <td></td> <td>For: SPATIALLY ENCODED AND MOBILE ARRAYS OF TETHERED LIPIDS</td> </tr> <tr> <td></td> <td>Art Unit: 1633 Conf. No. 5651 Examiner: Popa, Ileana</td> </tr> </table>				In re Application of : Ishii <i>et al.</i>		Application Number: 10/680,356		Filed: 10/06/2003		For: SPATIALLY ENCODED AND MOBILE ARRAYS OF TETHERED LIPIDS		Art Unit: 1633 Conf. No. 5651 Examiner: Popa, Ileana
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<p>Applicant hereby <b>appeals</b> to the Board of Patent Appeals and Interferences from the last decision of the examiner.</p> <p>The fee for this Notice of Appeal is (37 CFR 41.20(b)(1)) \$ <u>540.00</u></p> <p><input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee shown above is reduced by half, and the resulting fee is: \$ <u>270.00</u></p> <p><input type="checkbox"/> A check in the amount of the fee is enclosed.</p> <p><input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</p> <p><input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account. I have enclosed a duplicate copy of this sheet.</p> <p><input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account No. <u>50-4616</u>.</p> <p><input checked="" type="checkbox"/> A petition for an extension of time under 37 CFR 1.136(a) (PTO/SB/22) is enclosed.</p> <p><b>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</b></p> <p>I am the</p> <p><input type="checkbox"/> applicant /inventor. <u>/Jacqueline F. Mahoney/</u> Signature</p> <p><input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96) <u>Jacqueline F. Mahoney</u> Typed or printed name</p> <p><input checked="" type="checkbox"/> attorney or agent of record. Registration number <u>48,390</u> <u>650 590-1939</u> Telephone number</p> <p><input type="checkbox"/> attorney or agent acting under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34. <u>January 7, 2010</u> Date</p> <p>NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.</p> <p><input checked="" type="checkbox"/> *Total of <u>one</u> form is submitted.</p>												